

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF NEW MEXICO

STATE OF NEW MEXICO, *ex rel.*
State Engineer

Plaintiff,

vs.

ROMAN ARAGON, *et al.*,

Defendants.

69cv07941-BB

RIO CHAMA STREAM SYSTEM
Sections 7: Rito de Tierra Amarilla,
Rio Brazos, Rutherford & Plaza Blanca,
Cañones Creek, Village of Chama

CERTIFICATE OF SERVICE

Edward G. Newville, attorney for the Plaintiff State of New Mexico, *ex rel.* State Engineer states that pursuant to Fed. R. Civ. P 4(e)(1) and the New Mexico Rules of Civil Procedure 1-0004(E)(3) the following Defendants were served with process in the above-captioned matter. Service was made by certified mail (restricted delivery) addressed to the named Defendants. A copy of the Defendant's signature receipt is attached as an exhibit hereto.

<u>Defendant</u>	<u>Subfile</u>	<u>Date of Signed Receipt</u>
Olivia M. Cordova	CHRB-003-0008A	July 6, 2007
Chris Martinez	CHRB-004-0042	July 13, 2007

Dated: July 24, 2007

Respectfully submitted.

/s/ Ed Newville
EDWARD G. NEWVILLE
Special Assistant Attorney General
Office of State Engineer
P.O. Box 25102

Santa Fe, NM 87504-5102
(505) 867-7444 phone
(505) 867-2299 facsimile

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on the 24th day of July, 2007 I filed the foregoing electronically through the CM/ECF system which caused the parties on the electronic service list, as more fully set forth in the Notice of Electronic Filing, to be served via electronic mail.

/s/ Ed Newville
EDWARD G. NEWVILLE

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature <input checked="" type="checkbox"/> <i>Olivia M. Cordero</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <input type="checkbox"/> C. Date of Delivery <i>OLIVIA M. CORDOVA</i> <i>7-6-07</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>1. Article Addressed to: OLIVIA M. CORDOVA PO Box 68 TIERRA AMARILLA, NM RESTRICTED <i>87575</i> DELIVERY</p>		<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input checked="" type="checkbox"/> Yes</p>	
<p>2. Article Number <i>(Transfer from service label)</i> 7099-3220-0004-0767-5456</p>			

PS Form 3811, February 2004 Domestic Return Receipt *102595-02-M-1540*

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature <input checked="" type="checkbox"/> <i>Chris Martinez</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <input type="checkbox"/> C. Date of Delivery <i>Chris Martinez</i> <i>7-13-07</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>1. Article Number 2. <i>(Transfer from service label)</i> 7099 3220 0004 0767 5487</p>		<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input checked="" type="checkbox"/> Yes</p>	

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540